

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 12

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Radiation Therapy Services, Inc Political Action Committee

A. Full Name (Last, First, Middle Initial) Betty Rubenstein Mailing Address 13301 Ponderosa Way City State Zip Code Fort Myers FL 33907 FEC ID number of contributing federal political committee. C Name of Employer Occupation Housewife Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Transaction ID: 24664609 Amount of Each Receipt this Period 5000.00 Contribution
B. Full Name (Last, First, Middle Initial) DR. JAMES H. RUBENSTEIN, MD Mailing Address 13301 PONDEROSA WAY City State Zip Code FORT MYERS FL 33907 FEC ID number of contributing federal political committee. C Name of Employer Occupation 21st Century Oncology, Inc Medical Doctor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Transaction ID: 24664611 Amount of Each Receipt this Period 5000.00 Contribution
C. Full Name (Last, First, Middle Initial) CHRISTINA WILL Mailing Address 603 SW 56TH ST. City State Zip Code CAPE CORAL FL 33914 FEC ID number of contributing federal political committee. C Name of Employer Occupation Financial Services, Inc Credentialing Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 6 / 2 0 0 6 Transaction ID: 24664617 Amount of Each Receipt this Period 250.00 Contribution

SUBTOTAL of Receipts This Page (optional)

10250.00

TOTAL This Period (last page this line number only)